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CAMI	PAIGN CONTRIBUTIONS AND E	XPENSES	REPORT	State	of Nevada	
Ver	nneth E Greenwe	11		Centi	ral NV	
Name (pri	int) Office (if.	applicable)	VV. 894	ol. 4)	strict (if applicable)	
Mailing Ad	9 00//1=-	Hich /		Telephone No.		
E-Mail Ad	dad allen road (or od.	515cL_	Com.			
, T	ppropriate Box(es) ⊠ CANDIDATE □ PAC □ BAG	B ☐ POL PRT	Y IND EXP A	MENDED [] AN	NUAL FILING	
П	Annual Filing - Due January 15, 20	04		; ₌	-11 E	
	Period: January 1, 2003 - December 31, 2003				FILE	
				11 11	2 3 2004	
Incumber	Report #1 — Due August 31, 2004 hts in an Office with a 4-year term Period: Jan. 5,	2001 — Aug 26,	2004	301	~1	
Incumber	nts in an Office with a 6-year term Period: Dec. 20), 1998 — Aug 26 2004 – Aug. 26, 2		DE	N HELLER	
All others Ballot Ac		2002 – Aug 26, 2		SECRET	ARY OF STATE	
	Report #2 Due — October 26, 2004 Period: Aug. 27	7, 2004 — Oct. 21	, 2004	FOR OF	FICE USE ONLY	
П	Report #3 Due — January 15, 2005*					
DAC	Period: Oct. 22	2, 2004 Dec. 31 2, 2004 Dec. 5, 3				
BAGs on		., 2004 - 500. 0, .				
	Annual Filing - Due January 15, 2005 Period: January 1, 2004 - December 31, 200	04				
* Third	Report suffices for 2005 Annual Filing if car	ididate also fi	led Report Nos. 1	and 2		
					Cumulative	
	CONTRIBUTIONS SUMMARY				From Beginning of Report Period	
				This Period	#1 through End of This	
					Reporting Period	
1	. Total Monetary Contributions Received in Excess	of \$100	-	Ö		
2	. Total Monetary Contributions Received of \$100 or	Less	_			
		This Period	Cumulative From			
			Beginning of Report Period #1			
		^	Through End of This Reporting			
•	3. Total Amount of Monetary Contributions		Period		I	
3	Received			()		
	(Add Lines 1 and 2) I. Total Value of In Kind Contributions Received in		1 -		<u> </u>	
4	Excess of \$100					
	PV	PENSES SU	IRARA A DV			
			NAMES OF TAXABLE PARTY.		1	
	5. Total Monetary Expenses Paid in Excess of \$100	•	-	21		
	6. Total Monetary Expenses Paid of \$100 or Less 7. Total Amount of All Monetary Expenses Paid		-			
•	(Add Lines 5 and 6)			\mathcal{O}^{-}		
8	Total Value of In Kind Expenses in Excess of \$100	\circ				
	01 \$100				,	
		AFFIRMA	TION			
I Decla	are Under Penalty of Perjury That the Foregoing	g is True and C	Correct.			
	Emith E Hrun	will			24/04	
oignaiti	re Revised: .l:		PA	GE / GE	. 7	

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Report Period	# [
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Ken	neth	E.	G	r20	Luwe	//
Name (print)					Office (if applica	ble)

Centra L NV.
District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
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		0	

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Revised: Jan-04

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Kenneth E. Greenwell
Name (print) Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	4-
Expenses related to polling	G
Expenses related to special events	н
** Goods and services provided in kind for which money would otherwise have been paid	. 1
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	К

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

Catachteriod #/

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Office (if applicable)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
	A		0
	h		0
	С		0
	d		0
	<u>e</u>		0
	5		0
	9		0
	h		0
	Î		O
	J		0
	K		0
			0

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IN KIND CONTRIBUTIONS AND EXPENSES REPORT

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphemalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

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Ken	net	Th	E.G	rcenwell	
Name (print)				Office (if applicable	

CENTROLNU

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
				·
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IN KIND CAMPAIG	N	Report Period	#	
Kenneth	E. Greenwel	Central	N	$\overline{\mathcal{V}}$
Name (print)	Office (if applicable)	District (if an	plicab	le)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362 EL.201.doc

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